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ATTORNEY AT LAW

DEC 11 2007

December 11<sup>th</sup>, 2007**MEMO ENDORSED**

United States District Court Judge  
300 Quarropas Street  
White Plains, New York 10601  
Attn: Hon. Kenneth M. Karas

By Fax only 914-390-4152

Re: US v Henry P. Steeneck

Your Honor:

07 CR 929 (KMK)

I write again to request an additional week extension of Mr. Steeneck's release, under the same conditions as the prior Orders I had requested a letter from Dr. Rosner, in advance of my application, confirming the need for the continued release as well as the follow up examination, and have annexed same hereto. I recognize that the letter is not specific but it does indicate the necessity to adjust the "valve", which I interpret, will require Mr. Steeneck to visit Dr. Rosner. I will be requesting a more specific letter but have been informed by Dr. Rosner's office that Mr. Steeneck is being scheduled for a MRI and will need to see Dr. Rosner at least twice this week.

I thank the Court for its consideration.

Sincerely,

Charles J. Diven, Jr., Esq.

CJD/cl

cc: AUSA Richard Tarlowe, by fax only 914-993-1980  
Scott Kowal, US Pretrial Services by fax only 914-390-4039

The bail conditions imposed solely for purposes of allowing Mr. Steeneck to have

the medical care he needs are extended until

December 13, 2007 at 5pm. The issue of bail will

be addressed at the conference. However, the Parties

need to be prepared to address

a ~~possible~~ transition of Mr. Steeneck

back to prison in the next week.

SO ORDERED

KENNETH M. KARAS U.S.D.J.

12/11/07

**OFFICE NOTE****12/10/2007****RE: Henry Steeneck**

Henry Steeneck returned today for followup. He is doing quite well following his cystoperitoneal shunt. He has enjoyed significant decrease in headache and improvement in his ability to talk and walk.

On examination, he appears to be comfortable. His speech is less dysarthric. His gait and station are more normal. He does not have inward rotation of the legs or spasticity with respect to his gait, and his arm swing is more natural. He has no focal weakness. His reflexes still remain brisk. His wounds are healing well, and the staples have been removed.

My plan is to have Henry undergo a followup CT scan of the brain at the end of this week and then see me at the beginning of next week. I still yet may need to reprogram the valve to arrive at a more suitable pressure, and during this period, where the valve is being adjusted and the cyst is being observed, it would be best for him to be out of prison for his better safety and care.

Saran S. Rosner, M.D.

SSR/gst/tdo/gmr/1211/SSR25607